Reset ?

NOTE: You can fill out these fields for printing, but cannot save the values here

Prince Edward Island CANADA

Environment, Energy and Forestry

Forest Enhancement Program
Treatment Funding Application

Note: **The forest enhancement program provides financial support to forest landowners for the preparation of forest management plans and the implementation of selected forest management treatments prescribed in the plan. To ensure that your share of the cost is minimized, it is essential that your forest operations are implemented in a manner that is well planned and protects the environmental integrity of the site.**

For office use only
Plan No.

		Property Number(s):	
Applicant's name ***(last name first)***:			
Street address or RR No.:	Town/community:	Province/state:	Postal code/zip code:
Location of woodlot:		Occupation:	
Home Tel No.:	Work Tel No.:	Cell No.:	E-mail:
Contact Person (*if other than applicant)*:			Tel. No. of contact person:

Note to Applicant: ***(Please read carefully, complete the information below and sign.)***

1. I am the owner, or I have obtained the owner's permission, and make application for funding for the forest management treatment identified below.
2. I understand that in order to receive funding from government for the treatments identified, these treatments must be prescribed in a forest management plan approved by government and comply with the treatment guidelines.
3. I have read and understand the terms and conditions of the Forest Enhancement Program Agreement.
4. I understand that the incentive rates for forest management plan treatments represent the maximum amount payable by government and any additional costs incurred are my responsibility.
5. I understand that any funds approved for me under the Forest Enhancement Program, are guaranteed from the date of authorization, for a period of 120 days or until March 31, whichever occurs first. (An extension may be granted upon request pending availability of government funds.)

Please indicate the treatments from your plan you would like to complete:

Property ID	Stand No.	Treatment Code + Densitiy Count	Treatment Type	Treatment Area	Planting Species + Amount	Planning & Layout (Please Check)	Area Measurement (Please Check)